

pplication No. (if known): 10/789,458

Attorney Docket No.: 15115/107001

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Reply under 37 C.F.R. 1.116 (to Office Action dated 01/13/06) 11 pages

Amendment Transmittal (1 page)

One Month Request for Extension of Time Under 37 CFR 1.136(a)

(1 page)

Fee Transmittal (1 page)

Payment by credit card. Form PTO-2038 is attached (1 page)

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PTO/SB/17 (01-06)

Approved for use through 7/31/2006. OMB 0651-0032

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Complete if Known Complete if Known

V Fees pursuant to the Consolid	dated Appropriatio	ns Act, 2005 (H.R	4818). 📙			DICTO 11 1410111		
FEE TRANSMITTAL						10/789,458-Conf. #5178		
						February 27, 2004		
For FY 2006						Makoto Ohhira	hhira	
<u> </u>				Examiner Name	F	P. Vu		
Applicant claims sm		See 37 CFR 1.27		Art Unit		2871		
TOTAL AMOUNT OF PA	YMENT	(\$) 120.00		Attorney Docket No. 15115/107001				
METHOD OF PAYME	NT (check all ti	nat apply)		·				
Check X Credit Card Money Order None Other (please identify):								
X Deposit Account De	posit Account Numb	er: <u>50-0591</u> Dep	posit Accou	int Name:		Osha · Liang L	LP	
For the above-ide	ntified deposit a	account, the Dire	ector is h	nereby authorized	d to: (checl	k all that apply)		
Charge fee	s) indicated bel	ow		Charge	fee(s) indi	icated below, ex	cept for th	ne filing fee
	additional fee(s	s) or underpaymand 1.17	ent of	x Credit a	any overpa	yments		
FEE CALCULATION	(All the fees I	oelow are due	upon	filing or may	be subjec	ct to a surcha	rge.)	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
		G FEES Small Entity	SEA	RCH FEES Small Entity	EXAMIN	ATION FEES Small Entity		
Application Type	Fee (\$)		Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees P	aid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description Fee (\$) Fee (\$)								
Each claim over 20 (including Reissues) 50 25								
Each independent claim over 3 (including Reissues)						200 360	100 180	
						100		
Total Claims				10 (4)			ee Paid (\$	、 I
HP = highest numer of total cla		ater than 20.			<u>. 50</u>	- I		'
Indep. Claims Extr	a Claims F	ee (\$)	Fee Pa	id (\$)				_
4 -7=	x							
HP = highest numer of indepe		or, if greater than 3.						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of nanor (evaluating electronically filed requires or assumption								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
	Extra Sheets			ditional 50 or fract			Fee F	Paid (\$)
100 = /50 (round up to a whole number) x =								
4. OTHER FEE(\$) Non-English Specification \$130 for (no small antity discount)								
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00								
SUBMITTED BY Signature	-+	F = 701	IR	egistration No.	33,986	Telephone	(713) 228	3-8600
1/ (0	in P. Osha	5,079		Attorney/Agent)	55,566	<u> </u>	<u> </u>	
Jonatha		THOUNS	526	しまれると		Date	May 11,	2000

OIPE 4	Sop		6	95 - 12.	-00	\$1
MAY 1 1 201	AME	NDMENT :	ΓRANSMI	TTAL LE	CTTER	Docket No. 15115/107001
TENT & TRADEN	Application 10/789,458-Co		Filing February		Examine P. Vu	r Art Unit / 2871
1440	Applicant(s): Mak	koto Ohhira et				
	Invention: REFLE	CTOR, DISPL	AY DEVICE, A	AND ELECTR	ONIC APPARATU	JS
	Transmitted here	with is an ame		above-identif	ied application.	
	The fee has been	r calculated an			van en	
		Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
	Total Claims	11	- 20 =		х	
	Independent Claims	4	- 3 =		x	
	Multiple Depend	lent Claims (ch	eck if applicabl	le)		
	Other fee (pleas	e specify): E	Extension for res	sponse within fi	rst month	120.00
	TOTAL ADDIT	IONAL FEE FO	OR THIS AME	NDMENT:	· · · · · · · · · · · · · · · · · · ·	120.00
	x Large Entity				Small Entit	У
	Please char	al fee is require ge Deposit Acc copy of this she	ount No	50-0591 i	n the amount of \$	·
	A check in the x Payment by				the filing fee is en	closed.
	. —	is hereby auth below. A dup		-	Deposit Account I enclosed.	No. 50-0591
		ny overpaymer any additional fil		on processing	fees required under	37 CFR 1.16 and 1.17.
	Jonathan P. Os Attorney/Agent	ha <i>THO</i> Reg. No.: 33,	5/079 u4 < 5 < +6	EKSK.	Dated:	May 11, 2006
	OSHA · LIANG 1221 McKinney Houston, Texas (713) 228-8600	St., Suite 280 77010	0			